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Substitute for form 1449A/PTO				Complete if Known		
				Application Number		
INF	ORMATION D	isci os	URE	Filing Date		
STATEMENT BY APPLICANT				First Named Inventor	Einar Kristiansen	
(use as many sheets as necessary)				Group Art Unit		
			Sary	Examiner Name		
Sheet	1	of	1	Attorney Docket number	1935-00165	

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Examiner	/Nicole Coy/	Date	09/28/2006	
Signature		Considered		
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*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to client.